

**2005 LOCAL EMPLOYEE MONTHLY RATES:
DEDUCTIBLE HMO OPTION-- DEDUCTIBLE STANDARD PPP**

LOCAL EMPLOYEE GROUP HEALTH INSURANCE MONTHLY RATES FOR 2005	NON-MEDICARE RATES RATES APPLY ONLY IF NO FAMILY MEMBERS ARE ELIGIBLE FOR MEDICARE		MEDICARE RATES RATES APPLY IF AT LEAST ONE INSURED FAMILY MEMBER IS ELIGIBLE FOR MEDICARE		
	SINGLE/NON- MEDICARE	FAMILY/NON- MEDICARE	SINGLE MEDICARE	FAMILY MEDICARE - 2*	FAMILY MEDICARE - 1*
STANDARD PLAN: DANE--PPP ¹	820.70	1995.40	345.00	656.30	1168.70
STANDARD PLAN: MILWAUKEE--PPP ²	886.30	2159.20	345.00	656.30	1239.00
STANDARD PLAN: WAUKESHA--PPP ³	886.30	2159.20	345.00	656.30	1239.00
STANDARD PLAN: BALANCE OF STATE--PPP ⁴	772.50	1874.80	345.00	656.30	1117.00
STATE MAINTENANCE PLAN	592.00	1414.10	NA	NA	NA
ATRIUM HEALTH PLAN	527.70	1300.80	461.70	911.10	977.10
COMPCAREBLUE - AURORA/FAMILY	419.50	1030.30	353.30	694.30	760.50
COMPCAREBLUE NORTHEAST	437.20	1074.50	368.20	724.10	793.10
COMPCAREBLUE NORTHWEST	454.50	1117.80	383.10	753.90	825.30
COMPCAREBLUE SOUTHEAST	453.60	1115.50	382.20	752.10	823.50
DEAN HEALTH PLAN	324.10	791.80	271.80	531.30	583.60
GHC-EAU CLAIRE	500.70	1233.30	414.20	816.10	902.60
GHC-SOUTH CENTRAL	348.50	852.80	287.40	562.50	623.60
GUNDENSEN LUTHERAN	441.40	1085.10	290.90	569.50	720.00
HEALTH TRADITION	448.20	1102.10	374.70	737.10	810.60
HUMANA-EASTERN	488.50	1202.80	404.00	795.70	880.20
HUMANA-WESTERN	525.70	1295.80	435.00	857.70	948.40
MEDICAL ASSOCIATES HMO	378.70	928.30	286.80	561.30	653.20
MERCYCARE HEALTH PLAN	356.30	872.30	293.90	575.50	637.90
NETWORK-FOX VALLEY	443.90	1091.30	368.70	725.10	800.30
PHYSICIANS PLUS	334.10	816.80	280.40	548.50	602.20
PREVEA HEALTH PLAN	426.70	1048.30	356.50	700.70	770.90
UNITEDHEALTHCARE (formerly Touchpoint)	385.20	944.60	317.90	623.50	690.80
UNITY-COMMUNITY	412.20	1012.10	343.50	674.70	743.40
UNITY-UW HEALTH	332.90	813.80	276.80	541.30	597.40
Standard Plan rates are determined by the employer county or the retiree county of residence					
STANDARD PLAN AREA INCLUDES THE FOLLOWING:	¹ DANE: Dane, Grant, Jefferson, LaCrosse, Polk, St. Croix ² MILWAUKEE: Milwaukee county & <u>retirees living out of state</u> ³ WAUKESHA: Kenosha, Ozaukee, Racine, Washington, Waukesha ⁴ WISCONSIN: Balance of state				

N/A = "not applicable". Medicare eligible participants automatically receive Standard Plan benefits.

*Medicare Family 1=One family member enrolled in Medicare Parts A & B;
 Medicare Family 2=Two or more family members enrolled in Medicare Parts A & B.

Medicare premium rates apply only to subscribers who have terminated employment.